Dr. Watson Williams said he was glad to see that forceps were used in the case and not the snare. He now but rarely used the snare, which was often wasting time in cases when it became necessary, after all, to attack the base from which the polypus was growing. The forceps were therefore better used at first.

The PRESIDENT said he agreed with the remarks of Dr. Watson Williams. Sometimes the forceps were very useful for removing polypi which were far back. He presumed that in the present case a general anæsthetic was given, not to remove the polypus but to clear out the ethmoid.

Mr. HERBERT TILLEY, in reply, said he gave a general anæsthetic because the patient was an under-sized boy of $14\frac{1}{2}$ and very nervous, and in addition he had smaller polypi which could be seen from the anterior nares. It would have been quite impossible to pass a snare through the nostril and over the large posterior growth. Under the anæsthetic he removed the anterior polypi with the ordinary small snare and took hold of the large posterior polypus with ordinary "adenoid forceps." Practically no force was required to bring it away. He showed it because it was a very large polypus extending below the uvula, producing much trouble in an anæmic little boy. He also curetted the ethmoidal region. He made a note that "the left maxillary antrum was not explored," and this because it transilluminated clearly, and secondly because he (Mr. Tilley) had already opened three antra in similar cases and had not found the base of origin within this sinus, and hence thought it was scarcely worth while making a similar exploration in the present instance.

A Stereoscopic Slide showing well-marked Development of the Orbito-Ethmoidal Cells.

By Herbert Tilley, F.R.C.S.

The cells are seen from within the nasal cavity. The slide also shows a well-developed moriform hypertrophy of the posterior end of the inferior turbinal.

A Specimen of Subglottic Hyperplasia with considerable Narrowing of Tracheal Airway.

By HERBERT TILLEY, F.R.C.S.

The patient, aged 34, observed some difficulty in breathing three years ago, but only on exertion or fast walking. Shortly afterwards he suffered from several attacks of malaria in the north-west of